

BENTWORTH YOUTH WRESTLING
22TH ANNUAL
TUFFY MCVAY WRESTLING CLASSIC
***** OHIO TOURNAMENT OF CHAMPIONS QUALIFIER *****

Date: Saturday, January 7, 2012
 Location: Bentworth High School

Weigh In: Friday, January 6, 2012 6:00pm – 8:00pm (**All Divisions**)
 Saturday, January 7, 2012 7:30am – 8:30am (**7 & 8 and 11 & 12**)
 11:30am – 12:30am (**4 & Under, 5 & 6 and 9& 10**)

Wrestling Begins: **Stagger Start** - 9AM for 7 & 8 AND 11 & 12
 1PM for 4 & Under, 5 & 6 AND 9 & 11
 Coaches Meetings 8:30 am and 12:30.

Entry Fee: \$20.00 – payable to Bentworth Youth Wrestling Association (**BYWA**)
Note: \$3.00 of each entry will be donated to Cathy Wonsettler Foundation.

Registration: **ALL ENTRIES MUST BE RECEIVED BY WED. JAN 4, 2012**
PRE-REGISTRATION ONLY – NO REFUNDS! NO WALK INS!

Eligibility: Age as of December 31, 2011 (proof of age, may be requested)

Rules: Referees decisions are final. Unsportsmanlike conduct will mean expulsion from tournament.
 Tournament will be governed by PIAA rules. Wrestlers must wrestle to receive trophies and team points. No double entries. Tournament director reserves the right to combine weight classes.
 Double elimination. 1-1-1-OT-30 sec. Sudden death. 400 wrestler limit.

Awards: Individual Trophies for 1st, 2nd, 3rd and 4th places. Team Trophies for 1st, 2nd and 3rd place. Medal for fastest fall in each group.

Admissions: Adults - \$4.00 Students - \$2.00 (Children 5 and Under – FREE)

Concessions: Cafeteria opens at 7AM serving a variety of food all day!!

Mail Registration to: Terry Wise – Tournament Director
 Box 480
 Cokeburg, PA 15324

Questions to: 724-678-0564 - No calls after 10PM

AGE GROUP & WEIGHTS (CIRCLE)

4 & UNDER	35	42	50											
5 & 6	40	45	50	55	60	65	80							
7&8	45	50	55	60	65	70	75	85	105					
9&10	55	60	65	70	75	80	85	90	100	110	125	150		
11&12	65	70	75	80	85	90	95	100	105	115	125	140	160	200

WRESTLER'S NAME _____ TEAM NAME _____
 DATE OF BIRTH _____ PHONE # _____
 WRESTLER'S ADDRESS _____
 **COACH _____ COACH PHONE # _____

**** Must list coach's name & phone # in event of a cancellation.**

PLEASE ENTER ME IN THE ABOVE TOURNAMENT. I HERBY RELEASE BENTWORTH YOUTH WRESTLING ASSOCIATION; IT'S BOARD MEMBER'S OFFICERS, COACHES, BENTWORTH SCHOOL DISTRICT, THE OFFICIALS OF THE TOURNAMENT, AND EVERYONE CONNECTED WITH THIS TOURNAMENT, FOR ANY CLAIMS, LIABILITIES, OR RIGHTS TO DAMAGES FOR ANY INJURIES OR LOSSES SUFFERED BY MYSELF, OR MY CHILD IN TRAINING FOR, TRAVELING TO AND FROM, OR PARTICIPATING IN THIS TOURNAMENT.

SIGNATURE OF PARENT/GUARDIAN _____ DATE _____